

## DEPARTMENT OF THE NAVY

BUREAU OF MEDICINE AND SURGERY 2300 E STREET NW WASHINGTON DC 20372-5300

Canc: Jun 98
IN REPLY REFER TO

BUMEDNOTE 1524 BUMED-OOMC 27 Jun 97

#### **BUMED NOTICE 1524**

From: Chief, Bureau of Medicine and Surgery

Ships and Stations Having Medical Personnel To:

1997 GRADUATE MEDICAL EDUCATION SELECTION BOARD (GMESB) Subj: APPLICATION AND GUIDANCE FOR GME-2+ (RESIDENCY AND

FELLOWSHIP) AND NONCLINICAL POSTGRADUATE EDUCATION

Ref:

(a) BUMEDINST 1520.36 (b) SECNAVINST 1520.11 (c) SECNAVINST 7220.75C

(d) BUMEDINST 1520.35A

(1) 1997 GMESB Full-Time Inservice (FTIS) Residency Encl: Program and Position Summary

(2) 1997 GMESB Full-Time Inservice (FTIS) Fellowship Program and Position Summary

(3) 1997 GMESB Applicant Guidance for Training Available

in FTOS, OFI, and NADDS Programs
(4) Department of Defense Application for Graduate Medical Education

(5) Navy Supplement to DoD Application for Graduate Medical Education (Residenty/Fellowship) 1997 Graduate Medical Education Selection Board for Academic Year 1998

(6) Curriculum Vitae Format for DoD GME Application

- Purpose. To announce application procedures for academic year (AY) 1998 Navy-sponsored GME-2+ Graduate Medical Education (GME) Programs per references (a) and (b), and for nonclinical postgraduate education for medical corps officers.
- Summary of Changes for 1997. The following changes are included in this notice:
- The joint service selection process is further expanded. (4c)
- A mechanism is provided to select Medical Corps officers for nonclinical postgraduate education. (4d)
- A new DoD GME Application and Navy Supplement are required. (6a)
- d. A required joint service format for curriculum vitae is added. (6a)
- e. Submission of Fitness Reports as supporting documents are strongly encouraged, but optional. (6b)
- The application receipt deadline is earlier to accommodate additional joint service selection procedures. (8)

- g. A 2-year extension on active duty will be required to accept training if a selectee would have less than 1 year remaining obligated service at the commencement of training. (13b)
- 3. <u>Background</u>. Selections for AY 1998 GME programs will be made at the 1997 GMESB, convening in Arlington, VA from Tuesday, 2 December to Friday, 5 December 1997.
- a. Army, Navy, and Air Force GME representatives will meet at the Fifth Annual Joint Service Graduate Medical Education Selection Board (JSGMESB). The Army will host the 1997 JSGMESB and each service will simultaneously convene selection boards to jointly select applicants and ensure full use of GME positions to strengthen GME programs across all three services.
- b. The Flight Surgery (FS) and Undersea Medicine (UM) Selection Committee is an integral part of the annual GMESB, but a separate BUMED Notice 1520 provides application guidelines for FS and UM officer training.
- c. The majority of GME programs in the National Capital Region are integrated, but service-specific training positions are designated.

#### 4. GMESB Selection Process

- a. The GMESB is an administrative board governed by a formal precept issued annually by the Chief, Bureau of Medicine and Surgery (BUMED) and approved by the Deputy Chief of Naval Personnel (CHNAVPERS). The precept appoints the GMESB President (a Medical Corps flag officer) and voting members comprised of senior Medical Corps officers assigned to medical treatment facilities, operational or overseas units, and representing the operational medicine, primary care, academic, and research communities. The precept also authorizes the appointment of a program director's specialty committee or membership in Joint Service Selection Panels for each GME program or specialty being considered, and designates a senior recorder (NSHS-OM), assistant recorders, technical advisors, and administrative support personnel.
- b. The precept provides guidance for selecting Navy GME applicants, establishes the number of medical officers to be selected, delineates the specialties and programs for which applicants may be selected, and establishes the number of selections allowed for each specialty.
- c. The program directors' specialty committees, composed of Navy GME program directors and Medical Corps specialty leaders, or in most cases, Joint Service Selection Panels comprised of program directors, specialty leaders, and consultants in designated specialties from all three military Medical Department services, will meet to review records, score

applications, and recommend the selection of Army, Navy, and Air Force applicants. Points are awarded for preclinical and clinical medical school academic achievement, internship and residency performance, operational and utilization tour performance, the potential for a successful practice as a medical specialist career naval officer, and research. Additional points are awarded for applicants currently serving in an operational assignment and for military service completed before entering medical school.

- d. In addition to the standard clinical specialty committees, a Navy committee chaired by the Deputy Chief of the Medical Corps will consider applications for other formal nonclinical postgraduate education such as Masters of Healthcare Administration, Masters of Public Health, management training, executive medicine, and similar programs.
- e. The specialty committees and Joint Service Selection Panels make recommendations for selection to specific programs, but the Navy GMESB retains final authority for designating each Navy applicant as either a primary selectee, alternate selectee, or nonselectee. The results of the Navy GMESB are reviewed and approved by the Chief, BUMED and reviewed by CHNAVPERS before release.
- f. Applicants requesting full-time outservice (FTOS) training may be considered for other Federal institution (OFI) programs if these programs meet the needs of the Navy. Applicants designated as alternates for full-time inservice (FTIS) programs may also be considered for OFI programs.
- 5. Program Availability. BUMED projections of Navy Medical Corps future manpower requirements govern GME program and position availability and will be delineated in the precept for the 1997 GMESB. Enclosures (1) and (2) list current FTIS residency and fellowship programs. Projections regarding the availability of FTOS, Navy Active Duty Delay for Specialists (NADDS), and OFI training are in enclosure (3). Deferments are available to Reserve officers on active duty with remaining obligated service, per reference (b).
- a. Applications for continuation of deferment for additional training for current 1-year delay participants are generally not approved. A limited number of continued deferments may be available for applicants currently in this program, but only in critically undermanned specialties designated by BUMED for which there is no FTIS program or the number of FTIS, FTOS, and OFI positions is insufficient to meet projected requirements.
- b. There will be no preselection for FTIS programs. Certain civilian and OFI GME fellowships and a limited number of

residency programs require an 18- to 24-month lead time for applicants to interview and compete in national matching programs. Applicants for these programs may apply for FTOS, OFI, or deferment programs beginning in AY 1999/00. Preselection is granted only for documented lead-time reasons and not to accommodate projected rotation date (PRD) incompatibilities.

- c. Enclosure (3) lists projected vacancies in specialty and subspecialty areas for which training may be available in outservice programs (OFI, FTOS, NADDS). Final selection goals may differ slightly and will be established in the precept. The Bureau of Naval Personnel (BUPERS) subspecialty coding system uses two codes for each medical specialty, one for generalists and another for subspecialists, with additional qualification designators (AQDs) for specific subspecialties. No one may be placed in training unless there is a subspecialty code or an AQD for the requested specialty or subspecialty.
- d. Applicants preselected for a Navy-sponsored GME program at a previous GMESB automatically forfeit that status if they are selected for a different program at the 1997 GMESB.
- e. General information about Navy GME programs and specific program information by site is included in a special edition of the Medical Corps Update, "GME Catalog," available on line in the summer. Detailed information regarding GME programs can be obtained from individual program directors or specialty leaders. Telephone and e-mail numbers are available from the Navy GME Program Office or by accessing the Naval School of Health Sciences (NSHS) and BUMED web sites, or hospital-specific home pages (see paragraph 15).

#### 6. Application Content

- a. Each GME application must include the following documents:
  - (1) DoD Application for GME, enclosure (4).
- (2) 1997 Navy Supplement to DoD Application for GME, enclosure (5).
- (3) Current curriculum vitae in format prescribed in enclosure (6).
  - (4) Commanding officer's endorsement (see paragraph 14b).
  - (5) Complete medical school transcript and dean's letter.
- (6) A letter of recommendation from the applicant's GME-1 program, if applying for residency training, or from the GME-2+ program director if applying for fellowship training. For

those who have completed internship or residency, previous letters of recommendation reflecting only partial completion of GME-1 or GME-2+ training are not acceptable (see paragraph 14c).

- (7) No more than two additional letters of recommendation.
- b. It is strongly recommended, but not required, that applications include copies of the applicant's five most recent fitness reports.
- c. All applicants who completed Navy internships in 1996 or later must include an "Internship End of Training Evaluation" form as a supporting document to their GME application. This document will fulfill the GME-1 letter requirement at 6a(6) and is available from the GME Office at the training site.
- d. There is some duplication of data requested on the DoD Application and the Navy Supplement. This is necessary to accommodate the entry of data in both the Joint Service applicant database and the Navy GMESB database. Navy applicants may leave blocks 25, 26, and 27 of the DoD application blank.
- e. Although all DoD GME training sites are listed in block 23 of the DoD Application, each service will consider its requirements in selection and placement decisions. Navy applicants will be needed to fill Navy requirements and will be mostly selected to fill Navy inservice training positions.
- f. Applicants for nonclinical postgraduate education shall submit enclosures (4), (5), and (6) and follow the application content guidance above.
- 7. Applicant Communication with Program. Applicants are required to initiate a personal contact with the program director of the desired program. If a personal interview is not possible before the GMESB due to deployment or other factors, a telephone interview should be arranged. If neither type of interview is possible, the applicant should send written correspondence or an e-mail message stating the intent to apply for and interest in the program. Applicants for subspecialties are strongly encouraged to communicate with the appropriate specialty leader in addition to the program director. These contacts are essential to ensure two-way communication about specific program and applicant expectations. A lack of personal contact will degrade the strength of the application.
- 8. Application Submission. Navy applicants must submit their applications with all required documents via their commanding officer for formal command endorsement to arrive in the Navy GME Program Office by 19 September 1997. Forward applications to:

Commanding Officer
Naval School of Health Sciences
(Attention: Navy GME Program Office - Code OM)
Building 1, Tower 15, Room 15132
8901 Wisconsin Avenue
Bethesda, MD 20889-5611

- a. Commanding officers will ensure applications are formally endorsed (see paragraph 14b) and forwarded in a timely manner. Teaching hospitals should not hold applications for bulk mailing immediately before the deadline. This causes unacceptable application processing backlogs and does not allow the Navy GME Program Office to notify applicants to forward missing documents in time to be included with the application.
- b. Each applicant and his or her command must retain a copy of the completed GME application and all supporting documents. Letters of recommendation are considered confidential, and medical school deans' letters are normally accompanied by a signed waiver of the individual's right to see them. The Navy GME Program Office cannot provide copies of these documents to applicants or to a third party, including civilian or military GME officials. Recommendations received directly from reporting seniors, medical schools, and individuals are considered confidential and will not be provided to applicants.
- c. Applicants are responsible for ensuring final medical school transcripts and deans' letters are on file at the Navy GME Program Office or included with their applications. These documents will be on file at the Navy GME Program Office only if the applicant submitted a complete application for residency or fellowship training within the past 2 years. Medical school transcripts and deans' letters previously provided when initially applying for GME-1 (internship) are often incomplete. Current interns must submit final copies of these documents with their 1997 GMESB application. Applicants must request copies of medical school transcripts and deans' letters directly from their medical school.
- d. Applications will be considered for only the FTIS programs in enclosures (1) and (2), and for specialty and subspecialty areas in enclosure (3). Applications for specialties or programs for which no selection goal has been established will not be reviewed by the GMESB. Applicants will not be considered for more than two specialties.
- 9. Application Deadline. All deadlines are firm. The completed application, including all content explained in paragraph 6, must be received in the Navy GME Program Office by the close of business on 19 September 1997. If it is absolutely necessary to forward any supporting documents separately, they must be received by the Navy GME Program Office by 17 October 1997. Documents received after this date will not be filed with the

application and may not be available for review by the specialty committee members.

- a. Applications received after 19 September 1997 will not be processed for consideration by the 1997 GMESB, except as authorized by the President of the Board.
- b. Any modification (i.e., change in training location, type, program, specialty, application withdrawal, etc.) to an application must be received in writing in the Navy GME Program Office by 24 October 1997. Use e-mail, if possible.
- c. Army and Air Force officers must submit their applications through their service's chain of command.

Applications received in the Navy GME Program Office from Army and Air Force medical officers will be forwarded to the GME office of the officer's parent service.

- 10. Civilian and Inactive Reserve Medical Officer Applicants. Civilian and inactive Reserve medical officer applicants for Navy GME training must meet all requirements for initial appointment or recall to active duty in the Medical Corps of the United States Naval Reserve. If selected for Navy-sponsored GME, these applicants must apply for and accept initial appointment or recall before active duty orders will be written. Civilian and inactive Reserve medical officer applicants must submit a complete application with a request for either initial appointment or recall to active duty through the nearest Navy recruiting official to the Commander, Navy Recruiting Command (COMNAVCRUITCOM) (Code-32), 801 North Randolph Street, Arlington, VA 22203-1991. The COMNAVCRUITCOM Medical Programs Officer may be contacted by calling (703) 696-4926/32. When COMNAVCRUITCOM determines a civilian or recall applicant is eligible, the GME application with supporting documents and appropriate recruiting forms will be forwarded to the Navy GME Program Office for consideration at the GMESB. Applications received by the Navy GME Program Office directly from a civilian physician or inactive Reserve medical officer will be forwarded to COMNAVCRUITCOM for initial processing. Although NADDS and 1-Year Delays are inactive Reserve officers, they do not need to apply for recall because their recall is automatic upon completion of GME.
- 11. Application Processing. Each applicant will receive a letter from the Navy GME Program Office confirming that the application is complete or lacks indicated documents. If a confirmation letter has not been received within 6 weeks after submission or before 19 September 1997, contact the Navy GME Program Office. Incomplete applications will be forwarded to specialty committees for consideration, but this may result in diminished GME selection opportunity.

- a. Only applications submitted on current formats, enclosures (4) and (5), will be accepted and processed.
- b. BUPERS (PERS-4415) reviews the service records of all applicants before the GMESB convenes to determine GME assignment compatibility and ensures applicants meet all requirements for promotion and transfer (including compliance with physical readiness and body fat standards and completion of any Navy or Department of Defense tour length requirements). It is BUPERS' Navy-wide policy that officers who have failed to select for promotion to the next higher grade cannot be made available for assignment to full-time duty under instruction, including GME. The GMESB will consider only those applicants whose PRD is compatible with assignment to training in the AY in which GME training is requested and who are designated by BUPERS as available for training.
- 12. <u>Selection Notification</u>. Selection results for the 1997 GMESB will be announced by naval message and released on or about 15 December 1997. The naval message will publish the names of all Navy GME, FS, UM applicants designated as either a primary or alternate selectee. This will be the only notification for active duty applicants at Navy activities. GMESB results will also be available on the NSHS web site (see paragraph 15).
- a. Applicants designated as alternate selectees are placed in a pool of alternates maintained by the Navy GME Program Office and used on a case-by-case basis to fill vacancies caused by primary selectee declinations or to fill training requirements to meet the needs of the Navy. If a primary selectee cannot attend training, an alternate is identified by the Navy GME Program Office. BUPERS (PERS-4415) will determine the designated alternate's assignability, authorize his or her release for reassignment to training, and notify the Navy GME Program Office before a training position can be offered to an alternate. Since the process of alternate selection will not begin until February 1998, information pertaining to selection of alternates to fill vacancies will not be available until March 1998.
- b. Inactive Reserve officers in the 1-year delay or NADDS Program, other Reserve officers, and officers in FTOS and OFI programs who are selected for GME training will be notified by letter from the Navy GME Program Office. If a civilian physician or an inactive Reserve recall applicant is selected, NAVCRUITCOM and the applicant will be notified by letter from the Navy GME Program Office.
- c. Applicants not selected for training will be notified by letter from the Navy GME Program Office before 31 January 1998.
- 13. Applicant Decision to Accept or Decline Training. Applicants selected for GME, FS, or UM must ensure the Navy GME

Program Office is notified by 9 January 1998 of their decision to accept or decline the training for which they have been selected.

- a. The Naval message announcing the results of the 1997 GMESB will contain specific procedures for selectee responses. Individuals selected for more than one training program (GME, FS, or UM) may accept only one program. Acceptance of an FS or UM program will result in forfeiture of designation as an alternate for a GME program. Failure to notify the Navy GME Program Office by the required deadline may result in the loss of the training opportunity.
- b. Selectees with less than 1 year remaining obligated service at the time they would commence training will be required to execute a 2-year extension of active duty at the time they accept their GME positions. This extension will be applied concurrently with the obligation for training and will not add to the trainee's total obligation.
- 14. Application Guidance. Selection for GME training is competitive. The following information is provided to assist in improving GME selection opportunity.
- a. Each applicant should ensure all achievement, both academic and professional (board scores, internship, previous residency, and post-internship), is documented in the GME application. Most information in GME training files is provided by the applicant in current or previous applications. These files, which are reviewed with the application, may also contain previous BUPERS orders and GME-related correspondence originated by BUMED, the Navy GME Program Office, or local GME offices.
- b. The command endorsement is a key factor in selecting the best medical officers to fill a limited number of training positions. The endorsement by the applicant's commanding officer must be thorough, complete, and comment on the applicant's performance of duty, professional aptitude, potential as a career medical specialist, integrity, character, and overall officer characteristics.
- c. Letters of recommendation reflect professional accomplishments and provide program directors, specialty committee members and joint service selection panel members with vital information related to an applicant's performance as a physician and a naval officer. Current letters of recommendation should be submitted from previous program directors to afford the applicant and committee members the benefit of the most complete evaluation reflecting performance during the entire period of training. Two additional letters of recommendation and other supporting documents are optional and may be included at the applicant's discretion.

- d. Applicants for training which is offered at multiple Navy sites may express preferences, but will be considered for all sites. Cross country moves will rarely be approved. An applicant's refusal to consider training at one or more sites may be considered a negative factor in evaluating the applicant's potential for successful practice as a specialist and career officer unless certified for an exemption from this requirement by the specialty leader.
- e. Applicants desiring deferment, continued deferment, extension of current program length, or Navy sponsorship in FTOS and OFI must first apply to the GMESB. Applicants are not authorized to commit to a civilian or OFI program director or otherwise pursue formal acceptance into a civilian or OFI program until designated a primary FTOS or OFI selectee by the GMESB. Active duty medical officers cannot accept an offer to train in a civilian program without prior Navy authorization and will not be issued orders by BUPERS without the prior approval of the Director for Medical Corps Professional Programs. Applicants requesting assignment to training programs at the Uniformed Services University of the Health Sciences or an Army or Air Force activity will be considered by a Joint Service Selection Panel and, if selected, the site will be designated. Applicants for other OFI programs (National Institutes of Health, Armed Forces Institute of Pathology) must first be selected by the Navy GMESB and then approved by the institution before a specific program location can be confirmed.
- f. Reference (c) contains policy governing special pays for Medical Corps officers. Paragraph 9a(1) of reference (c) is germane to Medical Corps officers beginning initial residency (GME-2+) training.
- g. Reference (d) addresses obligated service for GME training. Further information is available from the BUMED Student Officer Accessions Branch (MED-512) at (202) 762-3396 or DSN 762-3396.
- 15. <u>Ouestions and Additional Information</u>. If you have questions after thoroughly reading this notice:
- a. Access the Medical Corps Professional Programs web site through the NSHS Home Page, http://nshs.med.navy.mil, or directly at http://nshs.med.navy.mil/gme/homepg.htm.
- b. Send an e-mail message to the Navy GME Program Office at jhpelot@nsh10.med.navy.mil.
- c. Contact the Navy GME Program Office by phone at (301) 295-5818 or DSN 295-5818 or by fax at (301) 295-6113.
  - d. Access the BUMED web site for hospital-specific

home pages under the "Medical Treatment Facilities" at http://supportl.med.navy.mil/bumed/.

16. Forms. NAVMED 1520/12 (Rev. 4-97), Navy Supplement to DoD Application for Graduate Medical Education, is provided as enclosure (5). The Department of Defense Application for Graduate Medical Education is attached as enclosure (4). These forms may be reproduced locally.

S. T. FISHER

Deputy

# 1997 GMESB FULL-TIME INSERVICE (FTIS) RESIDENCY PROGRAM AND POSITION SUMMARY

Program	Length	Bethesda MD	Portsmouth VA	San Diego CA	Total	
Aerospace Medicine *	2 Years	Naval Operational Medicine Institute, Pensacola FL				
Anesthesiology	3 Years	06 **	04	06	16	
Dermatology	3 Years	02 **		03.	05	
Emergency Medicine	3 Years		08	08	16	
Family Practice	2 Years			06 12 13 10		
Internal Medicine	2 Years	07	09	11	27	
Neurology	3 Years	02 **			02	
Neurosurgery	6 Years	01**			01	
Obstetrics and Gynecology	3 Years	04 **	05	05	14	
Ophthalmology	3 Years			03	03	
Orthopedic Surgery	4 Years	03	03	05	11	
Otolaryngology	5 Years	02 **	02	02	06	
Pathology	4 Years	02 **		02	04	
Pediatrics	2 Years	04 **	06	06	16	
Psychiatry	3 Years	03 **	04	04	11	
Radiology	4 Years	02 **		06	08	
General Surgery	4 Years	03	02	04	09	
Urology	4 Years		01		01	
Urology	5 Years	01		02	03	
				Total	209	

- + Critical operational specialty will consider as many qualified applicants as possible.
- \* 1 year FTOS followed immediately by 2 years FTIS program.
- \*\* National Capital Region Consortium Integrated Program.

Total training positions for AY 1998 are listed. Current manning constraints will reduce the number of actual selections by the 1997 GMESB.

# 1997 GMESB FULL-TIME INSERVICE (FTIS) FELLOWSHIP PROGRAM AND POSITION SUMMARY

Program	Length	Bethesda MD	Portsmouth VA	San Diego CA	Total
Anesthesia - Pain Management	1 Year		01		01
Internal Medicine - Cardiology	3 Years	02 *		02	04
Internal Medicine - Endocrinology	2 Years	01 *			01
Internal Medicine - Gastroenterology	3 Years	01 *		01	02
Internal Medicine - Hematology/Oncology	3 Years	01 *		Care needspread Cultipaction representation	01
Internal Medicine - Infectious Diseases	2 Years	02 *		02	04
Internal Medicine - Pulmonary Med/Critical Care	3 Years	02 *		02	04
Orthopedics - Hand Surgery	l Year			01	01
Pediatrics - Adolescent Medicine	l Year			01	01
Radiology - Imaging	l Year			01	01
	Total	09	01	10	20

<sup>\*</sup> National Capital Region Consortium Integrated Program.

Total training positions for AY 1998 are listed. Current manning constraints will reduce the number of actual selections by the 1997 GMESB.

# 1997 GMESB APPLICANT GUIDANCE FOR TRAINING AVAILABLE IN FTOS, OFI, AND NADDS PROGRAMS

These are preliminary projections for the outyears based on the current billet file. Specific selection goals for outservice training will be determined upon completion of the BUMED 1997 Training Plan.

FELLOWSHIPS	AY 98/AY 99			
Anesthesiology Subspecialties	2			
Cardiology Subspecialties	4			
Dermatology Subspecialties	1			
Emergency Medicine Supspecialties	1			
Family Practice Subspecialties	2			
Internal Medicine Subspecialties	10			
Neurology Subspecialties	2			
Neurologic Surgery Subspecialties	1			
Obstetrics/Gynecology Subspecialties	l			
Ophthalmology Subspecialties	1			
Orthopedic Subspecialties	1			
Otolaryngology Subspecialties	1			
Pathology Subspecialties	2			
Pediatric Subspecialties	3			
Psychiatry Subspecialties	2			
Radiology Subspecialties	1			
Surgery Subspecialties	10			
Urology Subspecialties	2			
RESIDENCIES	AY 98/AY 99			
General Preventive Medicine	2			
Occupational Medicine	3			
Undersea Medicine/Occupational Medicine	2			

Enclosure (3)

THIS FORM IS AFFECTED BY THE PRI		· C. K. I. C.					
AUTHORITY: 10 USC 3012.     PRINCIPAL PURPOSE(S): To com     ROUTINE USES: To evaluate applie     MANDATORY OR VOLUNTARY accomplished and GME may not be a	pile information necessary to cation for professional trainin DISCLOSURE: Disclosure	a in military st	ıd cıvılıan facilif	ies (Medicai Corps diffeers di	uy).		
1. NAME (Last, First, MI)	2. GRADE	3. SSN		4. CURRENT SPECI	ALTY	5. SERVICE	
I. (AUID (Dasigranstyon)						☐ Air Force	
			i			□Armv	
						☐ Navy	
6. HOME ADDRESS (ZIP+4)	7. HOME PH	ONE	8. COMPLI	ETE DUTY ADDRESS	9. DUTY	PHONE	
	(with Area Code	e)			CML:		
		1			DSN:		
					PGR:		
		ļ			FAX:		
10. EMAIL:							
			14 CDF/	CIALTY OR SUBSPE	TIAL TV DE	OUESTED	
11. CURRENT STATUS		In oray		CIAL I SON SODSI E		QUESTED	
☐ MEDICAL STUDENT (☐ HI	PSP USUHS [	ROTC)	Choice:				
ACTIVE DUTY INTERN			_				
ACTIVE DUTY RESIDENT			12 CTA	RT DATE REQUESTED	LL PROC	RAM LENGTH	
ACTIVE DUTY FELLOW	TIONAL (CTAFF		- 13. STA	RI DATE REQUESTED	14. I KOG	RAM EENGTH	
ACTIVE DUTY FIELD/OPERA						) YEARS	
DEFERRED/REDEF/FAP (Until	l Mi	onth/Year)	-		1	) 12/40	
OTHER (Specify)							
15.		TKA	AINING	LCOM	LETION OR	GRAD VEAR	
a. Undergraduate					LLTIONOR	SIGAD TELEC	
Major Approximate GPA		Honors	5				
b. Medical School				COMI	PLETION OR	GRAD YEAR	
Approximate GPA	Class Ranking	of	School Doe	s Not Rank			
Academic Honors		T		COM	PL OR GRAD	VEAD	
c. Internship/Specialty		Locati Locati		00111	COMPL OR GRAD YEAR		
d. Residency/Specialty e. Fellowship/Specialty		Locati			PL OR GRAD		
16. LIST OF PGY-1 ROTATI complete a categorical internship in	ONS AND TIME SPI that specialty. Not to be	ENT IN EA	CH: (Fill or	nt only if you are applying it a fellowship)	or a residency	and did not	
17. SPECIALTY BOARD CERT 18.		<del></del>	yes, indicate s				
Licensing Exam (Circle):	FLEX	USMLE	N	IBME NBO			
Part	Score		Percentile		Date Taken		
ī							
II							
III							
19. ECFMG (If applicable) Ce	ertificate #			Date			

NAME (Last, First, MI)			SSN		
20. POST-INTERN	SHIP EXPERIENCE (Last	thre	e (3) assignments)		
Duty Station	Duty Title		e (v) asorganicas)	Dates	
		<b>-</b>			
21. Participation in Federally Funded Programs (ch	eck all that annlies):				
☐ HPSP ☐ ROTC ☐ USUH			Military Academy		
22. I possess a current unrestricted medical license	☐ YES ☐ NO (If yes, a	ittach	copy of license with the	nis application.)	
23.	TRAINING PREFERENCES		.,	11	
Rank order 1, 2, 3, etc. Service maximum - 6 choices		***************************************			
a. AIR FORCE		b.	ARMY		
David Grant, Travis AFB, CA				Center, Fort Sam Houston, TX	
Eglin, Eglin AFB, FL				ical Center, Fort Gordon, GA	
Ehrling Berquist, Offutt AFB, NE		<u> </u>	Madigan Army Medica		
Keesler, Keesler AFB, MS	7.1	<u> </u>	Tripler Army Medical (		
Malcolm Grow, Andrews AFB, MD		-		lical Center, Washington, DC	
Scott, Scott AFB, IL		—		v Medical Center, El Paso, T	
Wilford Hall, Lackland AFB, TX				Center, Fort Bragg, NC	
Wright-Patterson, Wright Patterson AFB, OH USAFSAM (RAM/HYPERBARIC ONLY) Brooks	APD 797	Darnall Army Community Hospital, Fort Hood, TX			
Civilian Sponsored	AFB, 1X	DeWitt Army Community Hospital, Fort Belvoir, VA			
Civilian Deferred/Redeferred (Nonfunded)		Martin Army Community Hospital, Fort Benning, GA			
Civitan Deterred/Redeterred (Nontunded)		+	Civilian Sponsored Civilian Deferred (NG)	(ED)	
c NAVY		1.	INTEGRATED	MEP)	
National Naval Medical Center, Bethesda, MD			NCR (National Capital	Pegion)	
Naval Medical Center, Portsmouth, VA			San Antonio (Brooke/W		
Naval Medical Center, San Diego, CA  Raval Medical Center, San Diego, CA  e. OTHER				THORA FIGHT	
Naval Hospital Bremerton, Bremerton, WA			iversity of the Health Science		
Naval Hospital, Camp Pendleton, CA			Armed Forces Institute		
Naval Hospital, Jacksonville, FL		T	Walter Reed Army Inst	itute of Research	
Naval Hospital, Pensacola, FL			Other Federal (indicate		
Naval Operational Medicine Institute, Pensacola, F	L				
Navy Sponsored Fulltime Outservice (FTOS) Civili	ian GME				
Civilian Deferred (NADDS)					
24. I understand that the GME training received is direct					
certification in the specialty for which I have applied. It					
the most current Graduate Medical Education Directory					
GME) by the most current Yearbook and Directory publi					
requirements to become board certified by the respective					
those subspecialties which do not lead to board certificat					
appropriate specialty society. I understand that my service					
regulation and DoD Directives and that I will be made a understand the contents of this application and I affirm to					
knowledge. I am aware that I must submit all supporting	documents required by the mile	appn Hara	Cation is true and comple	signed for this application to	
be complete.	g documents required by the min	itary .	service for which I am as:	signed for this application to	
,	•				
	· ·				
APPLICANT'S SIGNATURE				DATE	
25. SIGNATURE (REVIEWER)	26 NAME CDADE DDA	NC	U AND TITLE		
23. SIGNATURE (REVIEWER)	26. NAME, GRADE, BRA	MITC	DANU LILLE	27. DATE	

NAVY SUPPLEMENT TO DOD APPLICATION FOR GRADUATE MEDICAL EDUCATION (RESIDENCY/FELLOWSHIP)
1997 GRADUATE MEDICAL EDUCATION SELECTION BOARD FOR ACADEMIC YEAR 1998

				APPLI	CATION I	DATE (MM	/DD/YY):	//
NAME					_		-	
LAST		FIR	ST		MI	GRADE	SSN	S.,
STATUS (Circle) U	1 2 SN USNR (Active)	3 USNR-R (Inactive)	4 USA	5 USAF	_	7 CIV	_	pecify)
SPECIALTY/SU	BSPECIALTY I	REQUESTED:						
TYPE OF TRAI	NING AND TRA	AINING START	DATE 1	REQUES'	red: (C	Check as	appropr	riate)
	Residency/Fe	ellowship Tr	aining	for A	Y 1998:		/	, MM
		AND/O	R				* *	PIPI
	training: to begin: Year level:	(Check)	P(RRRR	rams i GY-1/R esiden 1 (My in 2	n AY 199 -1 (Inte cy (R) ternship do	99/2000: ernship)	YY 	MM  PGY-2+ (Reside: Fellowship (F) begin residency at R-2 1
I will requi CURRENT TRAI (Circle one) CURRENT ASSI	NING STATUS	: 1-Student 4-Residen	2-1	ntern	3-Inte	ern with	Prior S	ty board examinat Service
4. Flight S 5. Flight S 6. Flight S 7. Undersea	rface MED Activit urgeon - Op urgeon - US urgeon - BU	erational MC MED Activity nal		10. 11. 12. 13.	a. Tra b. Tra a. Tra b. Tra Civilia: Staff S	inee - 0 inee - E inee - 1 inee - E n pecialis	FTOS L-Year De NADDS (U: st - Ope:	elay (USNR-R)
TYPE OF DEGR	EE: MD	DO	· · · · · · · · · · · · · · · · · · ·	n	EGREE D	ATE:	(YY/MM	)/

NAVY SUPPLEMENT TO DOD APPLICATION FOR GRADUATE MEDICAL EDUCATION (RESIDENCY/FELLOWSHIP)
1997 GRADUATE MEDICAL EDUCATION SELECTION BOARD FOR ACADEMIC YEAR 1998

OPTIONAL PERSONAL STATEMENT:	
This section may be used to amplify information provided on pages 1 through 2 of application or to address any personal and/or professional issues which the applications may be of value to the 1997 GMESB.	
<u>Privacy Act Statement</u> . The authority to request the information in this supplement is contained in 5 and 10 U.S.C 5031. The principle purpose for which this information is used is to assist officials at employees of the Department of the Navy in determining your eligibility and evaluating your request for the routine uses of this information are to determine course and training demands, requirements, and achievements; analyze student groups or courses, provide academic and performance reports, and for ot training, administration, and planning purposes. Disclosure of this information is voluntary; howeve to disclose requested information may result in nonselection for training.	nd or GME. d her
Applicant Acknowledgment:	
I have read and understand the instructions for the completion of this appli I certify that the information submitted on these application materials is comple correct to the best of my knowledge. I am aware that it is my responsibility to to submit any supplementary material (i.e., transcripts, letters of evaluation, e required.	ete and arrange
I am aware of the requirement to contact the program director/specialty lead specialty to which I am applying prior to the GME Selection Board either by personal/telephone interview, e-mail or written letter.	ler of th
I understand that if selected for training my service obligation will be conaccordance with BUMEDINST 1520.35A. I understand and agree that following training tender of resignation or request for release from active duty on my part will be disapproved until the total period of obligated active service is completed, except the convenience of the Government or in the case of individual determined humanit circumstances.	ing any

Date:\_\_

Signature of Applicant: \_\_\_

NAVY SUPPLEMENT TO DOD APPLICATION FOR GRADUATE MEDICAL EDUCATION (RESIDENCY/FELLOWSHIP)
1997 GRADUATE MEDICAL EDUCATION SELECTION BOARD FOR ACADEMIC YEAR 1998

#### DEMOGRAPHIC INFORMATION REQUEST

Please circle the applicable res	sponses:
U.S. CITIZEN: Y/N	
DATE OF BIRTH:YY/MM	AGE:
SEX: M/F	
RACE/ETHNIC GROUP	
<pre>1 = African-American (not of His 2 = American Indian or Alaskan N 3 = Asian American or Pacific Is 4 = Hispanic 5 = Caucasian (not of Hispanic of 6 = Other</pre>	Native slander
	PRIVACY ACT STATEMENT
departmental regulations. The permit a demographic characterized Department education and training which to assess affirmative actionaval Medical Department. Discharge department.	nder authority contained in 5 U.S.C. 301 and related principal purpose for obtaining this information is to zation of all applicants applying for naval Medical ag. The information will be used to provide a base from ion initiatives and equal opportunity programs within the losure of this information is voluntary. Failure to ion will not result in adverse consequences.
	Printed Name
Date	Signature

#### CURRICULUM VITAE FORMAT FOR DOD GME APPLICATION (Maximum 3 pages)

Date:

#### Personal Data:

Full Name:

Grade/Corps/Service:

SSN:

Current Home Address:

Home Telephone:

Duty Assignment Address:

Duty Assignment Telephone:

DSN:

Commercial:

Pager Number:

E-mail:

Birth Date/Place:

If married, and spouse is active duty, indicate full name, SSN,

what service and duty assignment:

#### Education:

Undergraduate:

Medical School:

Other Degrees:

#### Military Training Courses:

#### Professional Training and Experience:

Internship:

Residency:

Fellowship:

#### Work History/Military Assignment History:

Job Title:

Duty Location:

Dates Of Assignment:

### Licensure and Specialty Certification:

Current Unrestricted State License (State and Number):

Board Certified (Specialty/Date):

If Board Certification Is Pending Indicate Status:

## Honors And Recognition:

#### Academic Appointments:

#### Professional Societies:

Publications/Research: (must indicate in what capacity completed, i.e., medical student, intern/resident, house staff officer or field staff officer).